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Best Practices in Financial Sustainability Plans for Immunization Programs

April 2005

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Abstract

This paper examines the nominated “best practices” in financial sustainability plans (FSPs) submitted to the Global Alliance on Vaccines and Immunizations in late 2003. It develops and applies a method for identifying a “best practice.” The result is the classification of practices in seven areas of FSP preparation from eight countries as some form of good practice. The lessons from the identified good practices should serve as a guide to the preparation of future FSPs and to the revision of ones already prepared.

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Acronyms

EPI	Expanded Programme on Immunization
FSP	Financial Sustainability Plan
GAVI	Global Alliance on Vaccines and Immunizations
ICC	Inter-agency Coordinating Committee
IRC	Independent Review Committee
MOF	Ministry of Finance
MOH	Ministry of Health
NGO	Nongovernmental Organization
NIP	National Immunization Program
PHR^{plus}	Partners for Health Reform ^{plus}
USAID	United States Agency for International Development
WHO	World Health Organization

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1. Introduction

1.1 Purpose of this Paper

This paper examines the nominated “best practices” in financial sustainability plans (FSPs) submitted to the Global Alliance on Vaccines and Immunizations (GAVI) in late 2003. It develops and applies a method for identifying a “best practice.” The result is the classification of practices in seven areas of FSP preparation from eight countries as some form of good practice. The lessons from the identified good practices should serve as a guide to the preparation of future FSPs and to the revision of ones already prepared.

1.2 Background

GAVI was launched in 2000 to improve immunization rates and access to vaccines among the world’s poorest countries. Through the alliance – a public–private partnership between developing country health ministers, donor countries, vaccine manufacturers, nongovernmental organizations (NGOs), UNICEF, the World Health Organization (WHO), the Bill & Melinda Gates Foundation, and the World Bank – partners established the Vaccine Fund to provide long-term financing to the world’s poorest countries to strengthen immunization systems, increase vaccination safety, and introduce new and under-used vaccines. Accordingly, GAVI provides resources to countries with per capita incomes of less than US\$1,000, principally in the form of vaccines and related supplies, autodestruct syringes, and support for strengthening immunization systems.

GAVI Vaccine Fund Support

GAVI supports countries with a gross national product per capita of less than \$1,000 to:

- ▲ Introduce new vaccines (hepatitis B, Hib, and, in some cases, yellow fever)
- ▲ Increase basic immunization coverage
- ▲ Improved injection safety (through the provision of autodestruct syringes and related safe disposal methods).

GAVI support to countries is for a limited period of time – five to eight years – and quantity of resources. The resources are intended to be enough to meet program plans for improvement in the three categories of support for five years, though this support can be spread over the longer period. GAVI intends that its support be “catalytic.” That is, the limited-term GAVI funding is intended to stimulate program improvements (higher coverage, improved safety, and use of new vaccines) and the mobilization of resources to sustain the improvements. As a part of this approach, GAVI requires the countries it supports to prepare an FSP after receiving two years of assistance. The primary objective of this requirement is to increase the likelihood of the countries sustaining the gains in program performance that GAVI has supported, by being able to support the additional resource requirements through their own and external partner resources.

The FSP assesses the key financing challenges for a country's national immunization program (NIP) and describes how its government and external partners plan to mobilize and effectively use financial resources to support medium- and long-term program objectives. Prepared by the national government in collaboration with other members of the Inter-Agency Coordinating Committee (ICC) and/or other relevant donor groups, the FSP is a key instrument for governments to use in planning for the financial health of the immunization program – and in advocating among the ministry of health (MOH), ministry of finance (MOF), and external donor partners to support program expansion and improvement. For a country, the FSP can serve as an information and advocacy tool, an opportunity to develop sound strategies, and a planning tool to measure progress towards financial sustainability. For GAVI, the use of the FSP is intended to (1) ensure that every country receiving Vaccine Fund support knows what it needs to do to make progress toward financial sustainability and (2) generate cost data and an understanding of the financial commitments to immunization by national governments and their partners to monitor its “catalytic” approach.

Those partners that are intended to benefit most from the planning process involved in developing an FSP are the country and its NIP. The process of preparing the FSP may aid a government and its partners in identifying key financing issues, setting targets for financing, and developing an action plan for achieving targets. GAVI offers training to country teams and provides countries with technical support in preparation of their plan. Furthermore, GAVI developed and offers guidelines for preparation of the FSPs.¹ GAVI revises the guidelines yearly. The guidelines include a number of specific user-friendly cost analysis spreadsheet tools and examples of planning tables for both estimating expenditure projections and gaps and addressing challenges to financial sustainability. The country teams invited by GAVI to FSP training sessions typically comprise representatives of the MOH and MOF, the immunization program director, and a financial analyst working with the program. Technical assistance personnel working with the program may also join the teams for the training. Lastly, experts at the GAVI Secretariat in Geneva are available to provide remote technical assistance, solve problems, and offer review of preliminary work on FSPs, especially the use of the spreadsheet tools for cost and resource requirement estimation.

The process of FSP preparation often is iterative, with GAVI returning some submitted FSPs to countries with recommendations for major and minor revisions. GAVI organizes an Independent Review Committee (IRC) that meets periodically to evaluate country progress reports, new FSPs, and revised plans that have been re-submitted.

Financial Sustainability Plan Structure

The FSP has six parts.

The first four parts are helpful in diagnosing the country situation:

- (1) The overall economic, political, and health sector context
- (2) The plans for improvement of the immunization program
- (3) Estimates of past spending on and financing of the program
- (4) Projections of the resource requirements and potential sources of financing for the program during the period of GAVI assistance and for three years beyond

Section (5) presents a strategy to address the situation, especially the post-GAVI situation.

Lastly, in the comments section (6), stakeholders, such as the cooperating external assistance agencies that are part of the Interagency Coordinating Committee (ICC), are invited to comment on the FSP.

The ministers of health and finance of the concerned country sign the FSP.

¹ GAVI's *Guidelines for Preparing a National Immunization Program Financial Sustainability Plan* (2003) are referred to throughout this paper as the FSP guidelines.

The first set of GAVI-supported countries submitted FSPs in November 2002. These FSPs were reviewed and reported on in January 2003 by the IRC. The IRC reviewed a second set of FSPs in January 2004. At that time, the IRC reviewed 16 new FSPs, four re-submitted FSPs, and seven annual progress reports. This resulted in 14 FSPs accepted but asked to make minor revisions and six FSPs sent back for major revisions. No FSP was accepted without the IRC asking for at least minor revisions.

The IRC FSP Review Team's subsequent *Executive Report* (2004) revealed that, as a by-product of its examination of the FSPs, the team had identified several plans with one or more sections that might be considered "best practices" for a number of areas. The nine areas of potential best practices were:

- ▲ Involvement of the ICC
- ▲ Advocacy plans
- ▲ Planning ahead
- ▲ Scenarios
- ▲ Gap analysis
- ▲ Overall quality
- ▲ Response to IRC recommendations
- ▲ Strategic plans
- ▲ Costing of strategies

The FSP Review Process and Financial Sustainability

The FSP review process is not one of grading or ranking countries plans but is instead intended to:

- ▲ Provide the countries with recommendations to strengthen the plans
- ▲ Give the GAVI Board information about the real challenges of financial sustainability
- ▲ Identify support that countries may need to achieve financial sustainability

The process therefore identifies needs for technical assistance with the FSPs and their implementation and detects trends and issues concerning GAVI's concept of financial sustainability:

"... the ability of a country to mobilize and efficiently use domestic and supplementary external resources on a reliable basis to achieve current and future target levels of immunization performance in terms of access, utilization, quality, safety and equity"

In addition to enumerating these areas, the IRC recommended that these nominated plans be reviewed carefully and, where appropriate, be used as illustrative examples which would "likely be helpful" for both the *Guidelines for Preparing a National Immunization Program Financial Sustainability Plan* guidance document and training programs.

This paper provides a closer look – an evaluation and discussion – of those sections in country plans nominated as "best practices" to help inform these efforts by serving as models and/or inspiration for improving training, FSP guidelines, and, ultimately, plan preparation.

2. Methodology

This study examines and evaluates a number of the FSP sections nominated as “best practices” by the IRC FSP review team in Geneva in their report from February 2004. The limitations of the sample size made a pragmatic approach necessary. Therefore, the paper summarizes and draws conclusions based on a basic comparison of GAVI guideline documents to the FSPs nominated.

In order to become facile with the application of best practices, we investigated definitions and conceptualizations of best practices among other organizations, with a particular focus on criteria used to define them. This investigation was intended to inform our development of a suitable basic classification scale for nominating a given area of an FSP as a “best practice.”

The search for definitions of a best practice yielded considerable variation in the literature. For this paper, the authors chose to include a definition of a best practice plus two more categories that fall short of a *best* practice, with all three constituting “good” practices. We use as our definition of a best practice, “A practice that meets *and exceeds* the standard set,” often exceeding the standard by innovation. A better practice falls short of a best practice and only meets the standard. Classified below a better practice is a state-of-the-art practice. This category is a practice that does not quite meet the standard set, but represents the best available practice. This scale allowed for variation in the quality of the nominations and the possibility that sections nominated in the future could exceed the classification of the current nominees.

The investigation of the nominated sections began with an examination of what guidance existed for the corresponding topic area in the *Guidelines for Preparing a National Immunization Program Financial Sustainability Plan* (including related documents such as the detailed annexes to this same document, and reviews where the IRC may have commented on these nominated sections). Then the content of the nominated section was compared to what was recommended in the above documents in order to evaluate whether specific criteria existed, were met, or exceeded. Where possible, plans were compared to other country plans that were not nominated for additional insight. Following this appraisal, the authors attempted to make a relative judgment about these sections with the basic typology described above.

Classifying Practices

- ▲ **Best practice** – meets and exceeds standard (innovates)
- ▲ **Better practice** – meets standard
- ▲ **State of the art** – may meet some but not all of the standard; best of what is available

3. Results

Applying the classification criteria described above, the authors agreed with the IRC that the nominated sections of the FSPs reviewed in 2004 met the level of state-of-the-art or better in the first seven of the nine areas of nomination. For the latter two areas, the authors found that the nominated sections did not match up with meeting enough of the standard, although they may have been the best of what was available. Four of the IRC-nominated specific best practices in three areas did not meet one of our three levels of good practice when we examined them. We describe the FSP sections that made the state-of-the-art mark or higher, and put them up against the standard (specifications in the FSP guidelines) below.

ICC comments – Burkina Faso, Guyana, Pakistan

The IRC nominated the ICC comments sections of the FSPs of Burkina Faso, Guyana, and Pakistan. The ICC section provides information about who assisted in the development and/or review of the FSP. It is in this section that partners can voice an opinion and / or provide additional relevant factual information. The main purpose of this section is to ensure that key actors are well-informed about the contents of the FSP and have a consensus view that the FSP represents a good estimation of the current and future costs, resource requirements, and possibilities for financing for the immunization program.

Guidelines Criteria	Country Format		
	Guyana	Burkina Faso	Pakistan
Signed statements from key ICC members (leading financing partners), indicating that they have reviewed the document	Signed statements included in a PDF in GAVI FSP format	Signed letters sent to GAVI from each of the following: WHO, UNICEF, Save The Children (Netherlands), ARIVAS*	Signed letters sent to GAVI from each of the following: WHO representative, World Bank, and UNICEF
Comments on FSP by leading financing partners/members of ICC	Comments succinctly include the specific contributions to be made by each ICC partner.	Comments included on the above letters.	ICC comments are detailed – and some suggest that projections of funding be reconsidered.
Remarks	Guyana was recommended to include individual letters from partners on their commitments, comments, and participation in the FSP process. The individual ICC comments indicate commitments, but do not elaborate on participation.	Detailed letters may add more value.	Detailed letters have critical and useful comments.
Classification	State-of-the-art	Better practice	Better practice

* Appui au Renforcement de l'Indépendance Vaccinale en Afrique Sahélienne

The two parts necessary to complete this section are signatures from key ICC members indicating that they have reviewed the FSP and comments from any ICC members who wish to provide input. The signatures may be in the form of separate signed statements, rather than a full set of signatures on one page. The guidelines themselves ask primarily for signed statements and comments. Guyana provides this, but the IRC often recommends letters to be sent in order to elaborate, and Guyana did not send one. Guyana's ICC comments section is considered to be state-of-the-art because it mostly meets the standard, especially in its inclusion of documentation of specific partner commitments of resources. Pakistan's ICC comments section is categorized as a better practice because it meets what the guidelines call for but also contains critical comments that suggest the ICC's close review of the FSP and commitment. Burkina Faso also includes detailed letters from partners to supplement the guidelines format – and so is classified as a better practice, as well.

Advocacy – Tanzania and Zanzibar

The FSPs of both Tanzania and Zanzibar were nominated by the IRC for their advocacy components. The countries are advised in the FSP guidelines that the entire FSP can be utilized as an advocacy tool, particularly if the executive summary section is well developed. However, the GAVI guidelines do not set explicit standards or criteria for advocacy, rather stating its importance and the importance of ICC involvement for advocacy.

Guidelines Criteria	Countries: Tanzania and Zanzibar
FSP can serve as an advocacy tool – a framework for discussion among the MOH, MOF, NGOs, private businesses, and development partners about how well the current and future financing arrangements meet the program objectives for expansion and quality improvement.	The countries have gone so far as to include a specific advocacy strategy in the form of a table of actions – in an annex to the FSP. The countries' tables include advocacy focus by actor, key focus of advocacy messages, contact type, expectations, and monitoring indicators.
<p>As the executive summary can be a valuable tool for communication and advocacy among many different audiences, it is strongly recommended that considerable effort go into organizing and presenting key information (suggested aspects):</p> <ul style="list-style-type: none"> ▲ A statement about the key program objectives ▲ Assessment (or diagnosis) of the key financing challenges and opportunities associated with the country and health system context ▲ Current program costs and sources of financing ▲ Projected gap in resources during and after the remainder of current Vaccine Fund commitment, including graph depicting the funding gap over time ▲ Strategic priorities for financial sustainability, based on a diagnosis of the key financing challenges ▲ Short- and medium-term actions to move toward financial sustainability ▲ Indicators to monitor progress toward the objectives set for financial sustainability 	Countries have included these in their executive summary.
Classification	State-of-the-art

Many countries included advocacy among their strategies for addressing financial sustainability. However, few FSPs provided details on specific actions. Tanzania and Zanzibar gained distinction by providing tables specifying advocacy actions, targets for advocacy efforts, and responsibility for the listed actions. In addition, the executive summary attempts to summarize Tanzania's objectives, key challenges, gaps, and plan to contribute towards these gaps instead of only describing briefly the layout of the sections in the remainder of the FSP. However, since the GAVI FSP guidelines do not set any clear standard for advocacy, we classify Tanzania's and Zanzibar's advocacy efforts as state-of-the-art.

Planning ahead – The Gambia

The Gambia's FSP was nominated for planning ahead. A critical section of the FSP is the Future Resource Requirements and Program Financing / Gap Analysis. This section typically utilizes program objectives, strategies, and information on pre-Vaccine Fund year and Vaccine Fund year program costs and financing and translates them into projected future costs, based on assumptions about the inputs required to achieve the targets. However, the Gambia went beyond planning and projecting resource requirements for GAVI-supported improvements to its program, including in its resource requirement projections the introduction of the not-yet-available pneumococcal vaccine. Because of its small size (less than one million people) and willingness to cooperate with vaccine trials, The Gambia is a site for such trials and it is the beneficiary of vaccine manufacturers' support. Thus, The Gambia anticipates that vaccine manufacturers will assist it to introduce pneumococcal vaccine and includes this in its FSP. As this section certainly meets the standard, this planning ahead is classified as a better practice.

Scenarios – Zambia

The guidelines suggest that the FSP strategies sections include alternative scenarios for the future. Zambia's FSP has met this standard by describing and estimating the costs of four alternative scenarios focusing on the introduction of new vaccines and conducting supplemental immunization activities. The scenarios show the financial impact of adding the pentavalent DTP-Hep B-Hib or tetravalent DTP-Hep B vaccines, along with special measles immunization campaigns, above the standard routine immunization program. Finally, the projected resource requirements of the four scenarios and the sizes of the resource gap that would need filling are discussed in the context of competing priorities that could lead it to take different courses, once GAVI support ends. This meets the standard set by the guidelines and goes well beyond the single scenario shown in most of the other FSPs. Therefore it earns classification as a better practice.

Response to IRC comments – Guyana

The IRC reviewed Guyana's first FSP submission in January 2003 and provided detailed comments on each section of the document and specific recommendations. Guyana made commendable attempts in its resubmission to address the IRC comments and recommendations and largely succeeded in addressing them. As it addresses virtually all of the comments and recommendations, this section meets the standard and is therefore classified as a better practice.

IRC Comment	Country: Guyana
<i>Country & health system context</i>	
The committee seeks reassurances that the Expanded Programme on Immunization (EPI) will not be subject to delays or uncertainties created by the new allocation of responsibilities.	Description of new hiring mechanism to guard against this is included.
<i>Financial management</i>	
The committee seeks reassurances that resources allocated to the vaccination and immunization programs will be started and monitored as specified.	Description of recent findings from WHO/Pan American Health Organization evaluation of EPI is included.
The committee seeks assurances that central financing and purchasing of vaccines, syringes, and cold chain equipment will continue and be secure.	Need to assure and improve this is discussed.
<i>Baseline and current program costs</i>	
It would be helpful to have an analysis and commentary on trends in financing over the past five years.	Discussion about trends in volume and reliability of government and external financing included.
<i>Future resource requirements and program financing</i>	
Vaccine cost problems and options should be spelled out in any tables indicating the likely scale and timing of the problems. Tables should show the likely scale, proposed donors, and timing of these developments.	Table included.
<i>Strategy</i>	
The committee would like to see the “multi year plan indicating the level of resources and source of financing” that is said to have been prepared, with an assessment of the risks involved and some consideration of alternative strategies.	Plan included as an annex.
<i>ICC involvement</i>	
Financing by source through time, a comparison of this to resource needs, and an analysis of the subsequent financing gap needs to be provided in greater detail. The strategies considered for dealing with any potential financing shortfall should be articulated. The committee suggests that a table along lines shown in the annex be prepared.	Includes table of resource needs, future financing levels by proposed source and year, and gap. Suggested table format is utilized.
IRC Recommendation	IRC Finding
Undertake a more detailed analysis of the financing gap, future resource requirements (e.g., the 63% of rural vaccination costs unmet needs to be broken down), and financial sustainability strategies.	<ul style="list-style-type: none"> ▲ IRC pre-review says, “the analysis of the gap is adequate” ▲ Funding gap very well analyzed in resubmission ▲ Specific transport and other inputs targeted to “hinterlands” vaccinations ▲ Financial strategies are specified and analyzed in the areas of: (1) mobilization and use of resources, (2) reliability of resources, and (3) efficiency

Consider the cost, risk, timeframe, and potential impact of proposed strategies.	<ul style="list-style-type: none"> ▲ This has been done well for all of the strategies proposed ▲ The analyses presented indicate that preliminary discussions or more have been conducted with prospective funding sources for many elements of the strategy
Prioritize strategies accordingly.	<ul style="list-style-type: none"> ▲ Specific priorities are not set, but with the analysis performed (see above), this may be desirable, but not absolutely necessary
Develop an action plan.	<ul style="list-style-type: none"> ▲ The strategies presented in section 5 and associated actions are presented in Table 17, which, although not so labeled, constitute an action plan
Ensure that baseline values are applied to the indicators selected. We strongly recommend that you select 2-3 key indicators that are directly linked to the most important financial sustainability strategies.	<ul style="list-style-type: none"> ▲ Eight indicators with baseline values (where appropriate and needed) targets and timeframes are presented with the strategies ▲ Several of the indicators are from the list of “technically sound” ones provided in the FSP guidelines
Schedule a meeting with your ICC to share and discuss the issues that have arisen in the development of the FSP, IRC recommendations, and the integration of updates to the FSP.	<ul style="list-style-type: none"> ▲ Comments and signatures from six external partners, the MOH, and the MOF are shown in section 6 ▲ The comments indicate participation in the kind of session requested
Include individual letters from partners on their commitments, comments, and participation in the FSP process.	<ul style="list-style-type: none"> ▲ The individual ICC comments indicate commitments, but do not elaborate on participation in the whole resubmission process, although there is other evidence of close cooperation and collaboration with ICC members
Classification	Better practice

Gap analysis – Guyana

A critical section of the FSP is the Future Resource Requirements and Program Financing / Gap Analysis. This section estimates and analyzes the gap between future resource requirements – linked to the program objectives – and available financing over the remaining period of the current commitment of Vaccine Fund support, and for at least three years after that point. Closing this gap is critical for financial sustainability. Basic analyses that may give insight into exposing the primary factors contributing to the funding gap are suggested in the guidelines. Additional guidance for this section can be found as an annex to the guidelines. In addition to calculating suggested summary figures, Guyana responded to IRC recommendations to improve the presentation and level of detail of their initial analysis. As this section meets GAVI suggestions, IRC recommendations, and checklist criteria, this section was classified as a better practice.

Guidelines Criteria	Country: Guyana
<p>"It may be useful to report and comment on some summary figures, such as:"</p> <ul style="list-style-type: none"> ▲ Total projected funding gap through end of current Vaccine Fund commitment ▲ Vaccine expenses as share of total gap through end of current Vaccine Fund commitment ▲ Total projected funding gap during three years after end of current Vaccine Fund commitment, in absolute terms and as a share of a projected total spending on the health sector ▲ Vaccine expenses as share of total gap after end of current Vaccine Fund commitment 	Guyana has addressed each of these summary figures in its FSP.
IRC Recommendation	IRC Finding
Undertake a more detailed analysis of the financing gap, future resource requirements (e.g., the 63% of rural vaccination costs unmet needs to be broken down), and financial sustainability strategies.	<ul style="list-style-type: none"> ▲ Funding gap very well analyzed in resubmission ▲ Specific transport and other inputs targeted to "hinterlands" vaccinations ▲ Financial strategies are specified and analyzed in the areas of: (1) mobilization and use of resources, (2) reliability of resources, and (3) efficiency
IRC Checklist Item	IRC Finding
Was a good analysis of the gap presented in the FSP?	Yes
Were the main drivers of the gap identified?	Yes
Did the country analyze the remaining Vaccine Fund period and post-Vaccine Fund period gap?	Yes
Were the recommended graphs for the analysis of the gap done?	One graph completed
Any assumptions of government phasing in new vaccines?	Yes
Do the calculations of the gap present clear problems? (i.e., incorrect)	No
Classification	Better practice

Overall quality – Uganda

The IRC nominated the FSP from Uganda for its overall quality. This FSP received a number of favorable comments from the IRC. The need for major or minor revision, and the degree of either is often evident from the changes requested by the IRC to be made to the country FSP. These recommendations and changes should reflect the remaining improvements necessary for a promising financial sustainability plan. The changes for Uganda are considerably less demanding in comparison with the changes requested of other countries reviewed by the IRC. A sample of these changes is included in the table below. While many but not all these changes were extremely minor, Uganda's plan is classified as state of the art.

Sample of changes requested by IRC in review of Uganda FSP	Sample of changes requested by IRC in review of other country FSPs
<ul style="list-style-type: none"> ▲ Please clarify the assumptions used for resource projections. ▲ Specify if costs of advocacy, improving infrastructure, increasing efficiency, etc. are included in the resource need projections (please provide the detailed spreadsheet used to generate these tables) ▲ Identify probable sources of funds, and provide some risk analysis; explain reasons for optimistic assumption of increased government contribution for new vaccines. ▲ Please identify individuals or agencies responsible for different actions identified in the strategic plan. 	<ul style="list-style-type: none"> ▲ Alternative scenario for future financing needs without new vaccines need to be developed, and a gap analysis done. ▲ Qualitative discussion of expenditures and basic funding of the program was done. However, no tables were presented in these sections to allow meaningful conclusions. Hence there is need to review the spreadsheets and analyses and insert summaries in the text. ▲ Revise the cost projections, especially for other recurrent and capital expenditure, to show the underlying assumptions. We strongly recommend the use of the cost projection (Excel) tool. ▲ The FSP should mention actions on how the new vaccines will be funded beyond 2007 when GAVI funding ends. ▲ The FSP team should analyze and discuss the implication of the funding gap on the National Immunization Program. ▲ The MOH is encouraged to correct the inconsistencies identified in this report and in the pre-review summary report.
Classification	State-of-the-art

4. Discussion and Conclusions

The term “best practice” is used frequently and, sometimes, casually. Our investigation of the literature on how to judge a practice as “best” turned up an abundance of definitions and criteria. We selected from that abundance a set of definitions to apply to the nominations of the GAVI IRC concerning elements of the FSPs submitted in late 2003 and reviewed by the IRC in early 2004. The definition that we chose requires that the standard set for a practice be exceeded to earn the classification of “best.” Practices that meet but do not exceed the standard were defined as “better”; those that come close to the standard and are rarely, if ever, exceeded were classified as “state-of-the-art.”

When we applied these definitions to the nominated practices among the FSPs, we used GAVI’s FSP guidelines as the standard against which to judge the practices. In doing so, we found six practices in five areas that met the “better practice” definition, none that met the “best practice” mark, and several others that made the “state-of-the-art” mark. The closer look that we took at the nominated practices led us to conclude that some of the nominees did not achieve any of the classification levels that we set. Two areas that the IRC nominated practices in, strategic plans and costing of strategies, achieved no practices that reached even the state-of-the-art level in our analysis.

That none of the nominees reached classification of “best practices” according to our definitions and analysis should not be too surprising. The bar is high – exceeding the standard – to gain this classification and the process of doing financial sustainability planning is new. GAVI is pioneering this approach. Finally, the countries that are producing the FSPs are among the poorest in the world, hence it stretches their capabilities to be able to rigorously address the issues raised by the FSP process.

We can draw an optimistic conclusion from the practices that were examined. That is that eight different countries’ practices could be cited as ones to be emulated. The countries come from Asia, Latin America, and Africa, so they are spread around the developing world. The practices cover seven areas of FSP preparation. In addition, the one country among the group covered that got a second chance at its FSP, Guyana, ended up with the most mentions for its practices. This indicates that lessons can be learned from experience and responding to comments from the IRC.

Another conclusion is that there are variations in the ways in which the submitted FSP’s approach the standard set by the guidelines. This indicates that there is not necessarily a single way to achieve the standard. Thus, those reading about the various good practices described and analyzed here should not feel like they must “copy” the mentioned practices to achieve excellence. They can and should take into account their specific situation and what is recommended by the guidelines.

Finally, although Uganda did very well overall, especially in comparison to the other FSPs reviewed in early 2004, no FSP contains a complete set of sections that meets the standard. Every FSP reviewed by the IRC resulted in a request to make at least “minor” revisions. Therefore, every country could benefit from the lessons demonstrated by their peers on the sections where they need to make revisions.

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